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PTO/SB/05 (12/97) Approved for use through 09/30/00. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	GEMS:0131/yod 15-IS-5887	84	2				
First Named Inventor or Application Identifier Robert D. Barnes							
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EL 652 334 409 US

Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Microfiche Computer Program (Appendix) 6. 1. \boxtimes Fee Transmittal Form (Submit an original, and a duplicate for fee processing) Nucleotide and/or Amino Acid Sequence Submission 2. 図 Specification Total Pages 39 7. (preferred arrangement set forth below) (if applicable, all necessary) -Descriptive -Cross References to Related Application ☐ Computer Readable Copy a. -Statement Regarding Fed sponsored R & D Paper Copy (identical to computer copy) b. -Reference to Microfiche Appendix ☐ Statement verifying identity of above copies c. -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure **ACCOMPANYING APPLICATION PARTS** Assignment Papers (cover sheet & document(s)) Total Sheets 12 8. 3. \square Drawing(s) (35 USC 113) Total Pages 36 9. 37 CFR 3.73(b) Statement Power of Attorney (where there is an assignee) English Translation Document (if applicable) 10. 4. Oath or Declaration Newly executed (original or copy) $\bar{\Box}$ Information Disclosure ☐ Copies of IDS 11. Citations Statement (IDS)/PTO-1449 □ Copy from a prior application (37CFR) 1.63(d)) (for continuation/divisional with Box 17 completed) (Note Box 5 below) i. DELETION OF INVENTOR(S) 12. Preliminary Amendment Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). Return Receipt Postcard (MPEP 503) 13. Small Entity

Statement filed in prior application 14. 5. Incorporation By Reference Juseable if Box 4b is Statement(s) Status still proper and desired The entire disclosure of the prior application, from which copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. Certified Copy of Priority Document(s) 15. (if foreign priority is claimed) Other Divisional Continuation-in-part (CIP) of prior application No: Continuation 18. CORRESPONDENCE ADDRESS Correspondence address below Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) NAME Patrick S. Yoder Fletcher, Yoder & Van Someren ADDRESS P.O. Box 692289 ZIP CODE CITY Houston STATE 77269-2289 Texas TELEPHONE (281) 970-4545 COUNTRY USA (281) 970-4503

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11/20/00

		Complete if Known					
		Application Number	unassigned				
FEE TRA	NSMITTAL	Filing Date	herewith				
		First Named Inventor	Robert D. Barnes unknown				
		Group Art Unit					
		Examiner Name	unknown				
TOTAL AMOUNT OF PAYMENT	(\$) 750.00	Attorney Docket Number	GEMS:0131/YOD (15-IS-5887)				

METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)								
1.				oner is he		authorized to nents to:	charge	indicated	3.	3. ADDITIONAL FEES				
Depos	osit <u>07-0845/GEMS:0131/YOD (15-IS-5887)</u>					Large Fee	Entity Fee	Small Fee	Entity Fee		1			
Accou			 						Code	(\$)	Code	(\$)	Fee Description	Fee Paid
Number					105	130	205	65	Surcharge - late filling fee or oath	_				
Deposit GE Medical Systems Account				127	50	227	25	Surcharge - late provisional filing or cover sheet.	_					
Name						139	130	139	130	Non-English specification	-			
Charge Any Additional Charge the Issue Fee Set in 37					147	2,520	14/	2,520	For filing a request for reexamination	-				
Fee Required Under 37 CFR 1.18 at the Mailing of the CFR 1.16 and 1.17 Notice of Allowance, 37 CFR						112	920	112	920	Requesting publication of SIR prior to Examiner action	-			
2. Payment Enclosed:								113	1,840	113	1,840	Requesting publication of SIR after Examiner action	-	
Check Money Order Other						115	110	215	55	Extension for response within first month	-			
FEE CALCULATION (fees effective 10/01/96)						116	400	216	200	Extension for response within second month				
1.	FILII								117	950	217	475	Extension for response within third month	
Large	Entity		Small	•	_				118	1,570	218	755	Extension for response within fourth month	
Fee Code	Fee (\$)		Fee Code	Fee (\$)	Fe	e Descriptio	n	Fee Paid	119	310	219	155	Notice of Appeal	_ I
101	(3)	,	201	395	l Iti	lity filing fee		710.00	120	310	220	155	Filing a brief in support of an appeal	-
106	330		206	165		sign filing fe	2		121	270	221	135	Request for oral hearing	_
107	540		207	270	Pla	ant filing fee		_	138	1,510	138	1,510	Petition to institute a public use proceeding	
108 114	790 150		208 214	395 75		issue filing fo ovisional filin		_	140	110	240	55	Petition to revive unavoidably abandoned application	-
				;	SUBT	FOTAL (1)		(\$) <u>710.00</u>	141	1,320	241	660	Petition to revive unintentionally abandoned application	-
	<u> </u>								142	1,320	242	660	Utility issue fee (or reissue)	
2.	CLA	IMS				Fee from		Fee Paid	143	450	243	225	Design issue fee	_
				Extra		below			144	670	244	335	Plant issue fee	
Total C	laims	1 -	20 =	0	X	_18_	=	0.00	122	130 50	122 123	130 50	Petitions to the Commissioner Petitions related to provisional	
	ndent_	1 -	3 =	0	X	_80_	=	0 <u>.00</u>	123	50	123	50	applications	_
Claims		endent	Claims		x		=	_	126	240	126	240	Submission of Information Disclosure Stmt	
Large	•			Entity					581	40	581	40	Recording each patent	<u>40.00</u>
Fee Code	Fee (\$)		Fee Code	Fee (\$)	Fe	e Description	on		140	700	245	205	assignment per property (times number of properties) Filing a submission after final	
103	18		203	11	Cla	aims in exce	ss of 20	1	146	790	246	395	rejection (37 CFR 1.129(a))	—
102	78		202	41		Independent claims in excess of 3			149	790	249	395	For each additional invention to be examined	
104	270		204	135	M	uttiple depen	dent da	im					(37 CFR 1.129(b))	
109	82		209	41		issue indepen ims over origir		t	1	er fee (sp er fee (sp	•	_		_
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